As a blow named inventor, I hereby declare that:

MAY 3 1

Number

COPY OF PAPERS **ORIGINALLY FILED**

My residence appropries address and citizenship are as stated below next to my name.

Docket No.: 208.1005US

Yes

No

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter that is claimed and for which a patent is sought on the invention entitled: FELODIPINE TRANSDERMAL DEVICE AND METHODS the specification of which (check one) X is attached hereto was filed on Application Serial No. and was amended on 88 I hereby authorize and request our attorneys, Davidson, Davidson & Kappel, LLC of 485 Seventh Avenue, New York, New York 10018 to insert here in parentheses (application number_ 10/045, 595 1012312001) the filing date and application number of sald application when known. I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose all information that is known to me to be material to the patentability of this application as defined in Title 37, Code of Federal Regulations, §1.56. I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign and/or provisional application(s) for patent or inventor's certificate listed below and have also identified below any foreign and/or provisional application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed: Priority dalmed United States Provisional Application No. \boxtimes 60/242,514 USA 23/10/00 Yes No Number Country Day/Month/Year Filed Priority claimed

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Country

Day/Month/Year Filed

Application Serial Number	Day/Month/Year Filed	Status
Application Serial Number	Day/Month/Year Filed	Status

And I hereby appoint Clifford M. Davidson, Reg. No. 32,728, Leslye B. Davidson, Reg. No. 38,854, Cary S. Kappel, Reg. No. 36,561, William C. Gehris, Reg. No. 38,156, Morey B. Wildes, Reg. No. 36,968, Robert J. Paradiso, Reg. No. 41,240, Erik R. Swanson, Reg. No. 40,833, Thomas P. Canty, Reg. No. 44,586, Livia S. Boyadjian, Reg. No. 34,781, and all other registered attorneys and agents at Davidson, Davidson & Kappel, LLC, U.S. Patent and Trademark Office Customer Number 23280, my attorneys, with full power of substitution and revocation, to prosecute this application and to transact all business in the U.S. Patent and Trademark Office connected therewith; correspondence address: DAVIDSON, DAVIDSON & KAPPEL, LLC, 485 Seventh Avenue, 14th Floor, New York, New York 10018; Telephone: (212) 736-1940; Fax: (212) 736-2427.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code, §1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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			Docket No.:208.1005US
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Inventor's signature	Jack J. Valla	eigneture	
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Inventor's signature		Inventor's signature	
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Residence		Residence	
Post Office Address	·	Post Office Address	
Citizenship		Citizenship	
Full name of additional inventor		Full name of additional Inventor	
Inventor's signature		Inventor's signature	
Date		Date	
Residence		Residence	
Post Office Address		Post Office Address	
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As a below hamed inventor; hereby declare that:

My residence, post office sideness and citizenship are as stated below next to my name.

I believe I and sole inventor (if only one name is listed below) or an original, first and joint Inventor (if plural names are listed below) of the subject matter that is claimed and for which a patent is sought on the invention entitled:

plural names ar	e listed below) of t	he subject ma	tter tha	it is clair	me	d and for w	hich a p	patent is s	sought o	on the in	ventic	on entitled:
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No. 36,561, Will Erik R. Swanso registered atto Number 23280 business in the	ppoint Clifford M. illiam C. Gehris, Ron, Reg. No. 40,83 rneys and agents, my attorneys, with U.S. Patent and C, 485 Seventh Av.	leg. No. 38,15 3, Thomas P. at Davidson, h full power of Trademark Off	6, Mor Canty David subst	ey B. W , Reg. I dson & itution a nnected	/ild No. Ka and I the	es, Reg. N 44,586, L appel, LLC revocation erewith; co	lo. 36,96 ivia S. E i, U.S. i n, to pro orrespon	68, Robe Boyadjian Patent a secute th idence at	rt J. Pa , Reg. I nd Trac iis appli Idress:	radiso, I No. 34,7 Jemark cation a DAVIDS	Reg. 1 81, a Office nd to SON,	no. 41,240, nd all other c Customer transact all DAVIDSON
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Il name of sole or it inventor	Lino TAVARES					Full name of additional I		Ihor St	HEVCH	UK	······································	
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ite						Date						
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	1		
Full name of additional Inventor	Kirti VALIA	Full name of additional Inventor	
		Inventor's signature	×
Inventor's signature		Date	·
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Inventor's signature		Inventor's eignature	
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additional Inventor		Inventor's	
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Residence		Residence	
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